Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000188526 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 : (954)384-8565 Fax Number : (954)385-5175

िहितरिंदा the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Con Email Address: Office Weffelinecounting com

LLC REGISTERED AGENT RESIGNATION TOYOMONAGAS LLC

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May 29, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

TOYOMONAGAS LLC 4803 SW 119TH AVE COOPER CITY, FL 33330

SUBJECT: TOYOMONAGAS LLC

REF: L22000189485

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The company name E & F LATIN GROUP LLC needs to be in the space where you have Diego Figueroa.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

FAX Aud. #: H24000188526 Letter Number: 124A00011610

COVER LETTER

TO: Registration Section Division of Corporations	
TOYOMONAGAS LLC SUBJECT: Name of Limited Liability	Company
DOCUMENT NUMBER: L22000189485	
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	he following:
DIEGO FIGUEROA	
Name of Person	-
E & F LATIN GROUP, L.L.C.	
Name of Firm/Company	
1820 N CORPORATE LAKES BLVD SUITE 109	
Address	
WESTON, FL 33326	
City/State and Zip Code	
OFFICEMEFLATINACCOUNTING.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
DIEGO FIGUEROA 954	384 8565
Name of Person Area Code	Daytime Telephone Number

linclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	sions of section 605.0115, Florida Statutes, the undersigned,	
	E & F LATIN GROUP LLC , hereby resigns as	
	Name of Registered Agent	
Registered Agent for	TOYOMONAGAS LLC	
	Name of Limited Liability Company	
	, mak vi ramet v maniy sampeny	
L22000189485		
Document	Number, if known	
A copy of this resign;	ation was mailed to the above listed limited liability company at its last known address.	
The agency is termina	ated and the office discontinued on the 31st day after the date on which this statement is filed.	
<		
	Signature of Resigning Agent	
10: 1 10:		
If signing on behalf o	-	
	DIEGO FIGUEROA	
	Typed or Printed Name	3
	REGISTERED AGENT	_
	Capacity	
	29	
	FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/voluntarily dissolved/or withdrawn limited liability company	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314